

TO BE COMPLETED BY  
INSTITUTE/CENTER

## Request for Department of State (DOS)/Department of Homeland Security (DHS) Extension of J-1 Exchange Visitor

**Instructions:** This form must be completed by the NIH Institute/Center (IC) to request an exceptional J-1 extension beyond the five (5) year maximum duration in the G-7 program. This form and the extension request package must be received by DIS no less than six (6) months prior to the expiration date of the Exchange Visitor's current Form DS-2019. Please note that the IC is required to pay a \$367 non-refundable extension fee. Fee payment does not guarantee approval of the G-7 request. See the DIS [G-7 Checklist](#) for details on the required documentation and fee payment.

### SCIENTIST INFORMATION

Name of Exchange Visitor: \_\_\_\_\_ Date: \_\_\_\_\_

IC: \_\_\_\_\_ Lab/Branch Name: \_\_\_\_\_

Name of IC Sponsor/Supervisor: \_\_\_\_\_

Requested Start Date (Month/Day/Year): \_\_\_\_\_ Not-to-Exceed (NTE) Date (Month/Day/Year): \_\_\_\_\_

1. Did the Exchange Visitor transfer his/her J-1 program to the NIH from another U.S. institution? Yes  No
2. Is this a second request for an exceptional extension? Yes  No
3. Does the Exchange Visitor have any plans to travel outside the U.S. between now and the next 12 months? Yes  No   
If yes, please list dates of travel (even if tentative): \_\_\_\_\_

### SCIENTIFIC DIRECTOR CERTIFICATION

I have reviewed this extension request. My IC requires the Exchange Visitor's continued stay to successfully conclude government research. No guarantees or promises have been made regarding the filing or approval of this extension. I understand that the Department of State and the Department of Homeland Security determine final approval of this extension.

Name: \_\_\_\_\_

Signature/Date (Day/Month/Year): \_\_\_\_\_

### EXCHANGE VISITOR CERTIFICATION

I have not applied for a waiver of my two-year home country physical presence requirement. I understand that the Department of State and the Department of Homeland Security determine final approval of this extension. I understand that if approved in the NIH's G-7 program:

- I am not able to transfer my J-1 status to another J-1 program outside NIH, except for other programs designated as "G-7."
- I must leave NIH at the end of the G-7 extension period **IF** I received a terminal extension, such as a terminal 3-month fellowship extension or an exceptional extension of my post-doctoral fellowship to a sixth year
- If I did receive an exceptional sixth year extension, I further understand that I may only return to the NIH intramural research program after a two-year period has elapsed as per the [OIR Sourcebook](#)

Signature/Date (Day/Month/Year): \_\_\_\_\_